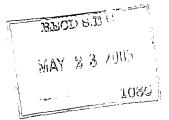
313718

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

-	) 5056234	
DA	ATE RECEIVED	

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)
Series B Preferred Stock Financing (and the common stock issuable upon conversion thereof)
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE
Type of Filing: New Filing
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer.
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  NanoStar, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code)  744 Sand Hill Road, Menlo Park, CA 94025  (Number and Street, City, State, Zip Code)  76970) 274-6130
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) same as above
Brief Description of Business Provider of crystal carbon nanotubes for hydrogen-based energy uses
Type of Business Organization MAY 2 / 2005 5
☑ corporation       ☐ limited partnership, already formed       ☐ other (please specify):       Image: Corporation of the partnership in the par
Actual or Estimated Date of Incorporation or Organization:    Month   Year
GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under <u>Regulation D</u> or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. !	BASIC IDENTIFICA	ATION DATA								
<ul> <li>Each beneficial owner having the power to vote or disp</li> <li>Each executive officer and director of corporate issuer</li> </ul>	<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>									
Check Box(es) that Apply: Promoter Bene	ficial Owner	Executive Officer	□ Director	General and/or Managing Partner						
Full Name (Last name first, if individual)  Gintz, Christopher J.	***************************************									
Business or Residence Address (Number and Street, City, 18 Hunter Road, Suite 2, Hilton Head Island, SC 29928										
<u> </u>		Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual) Clary, Michael		****								
Business or Residence Address (Number and Street, City, c/o NanoStar, Inc., 2744 Sand Hill Road, Menlo Park, (										
	eficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual) NanoHoldings, LLC		,								
Business or Residence Address (Number and Street, City,	State, Zip Code)									
131 Rowayton Avenue, Rowayton, CT 06853										
Check Box(es) that Apply:  Promoter Bene	ficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual) NanoHoldings, NS-I, L.P.		······								
Business or Residence Address (Number and Street, City, 131 Rowayton Avenue, Rowayton, CT 06853	State, Zip Code)									
Check Box(es) that Apply: Promoter Bene	ficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)  NanoHoldings, NS-II, L.P.										
Business or Residence Address (Number and Street, City,	State, Zip Code)									
Check Box(es) that Apply: ☐ Promoter ☐ Benefit Benefi	ficial Owner	Executive Officer	Director	General and/or						
Full Name (Last name first, if individual)				Managing Partner						
Allara, David										
Business or Residence Address (Number and Street, City, 2517 Sleepy Hollow Drive, State College, PA 16803	State, Zip Code)									
	eficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)  Hasslacher, Brosl										
Business or Residence Address (Number and Street, City,	State, Zip Code)									
Check Box(es) that Apply: Promoter Ben	eficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)  Imholt, Timothy		,·								
Business or Residence Address (Number and Street, City, 4229 Hunt #3406, Carrollton, TX 75010	State, Zip Code)									
	copy and use addition	nal copies of this sheet,	as necessary)							

GDSVF&H\620337.1

	A. BASIC IDENTIFICATION DATA										
<ul> <li>Enter the information requested for the following:</li> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>											
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)  Joy, William N.											
Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 23, Aspen, CO 81612											
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	☐ General and/or  Managing Partner						
Full Name (Last name first, University of North Texas	if individual)										
Business or Residence Address 1501 Chestnut Street, Adm	·				<del></del> -						
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, KPCB Holdings, Inc.	if individual)										
Business or Residence Addr c/o Kleiner, Perkins, Caufi	,										
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner						
Full Name (Last name first, Nixon, J. Jeffery	if individual)										
Business or Residence Addr c/o Interactive Capital Par	,										
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner						
Full Name (Last name first, Doerr, John	if individual)										
Business or Residence Addr c/o Kleiner, Perkins, Caufi	,										
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner						
Full Name (Last name first, Hearst III, William R.	if individual)										
Business or Residence Addr c/o Kleiner, Perkins, Caufi	•										
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner						
Full Name (Last name first, Shridar, K.R.	if individual)										
Business or Residence Addr c/o NanoStar, Inc., 2744 Sa	•		44								

Yes  1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	No 🖂
Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual? \$\frac{\text{n/a}}{\text{Yes}}\$\$  3. Does the offering permit joint ownership of a single unit? \$\frac{\text{N/a}}{\text{Ves}}\$\$  4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or	
Yes  3. Does the offering permit joint ownership of a single unit?  4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or	No
<ol> <li>Does the offering permit joint ownership of a single unit?</li> <li>Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or</li> </ol>	No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or	
with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. NONE	
Full Name (Last name first, if individual) n/a	
Business or Residence Address (Number and Street, City, State, Zip Code) n/a	
Name of Associated Broker or Dealer n/a	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individuals States)	States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	[ID]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS]	[MO]
	[PA]
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[PR]
Full Name (Last name first, if individual) n/a	
Business or Residence Address (Number and Street, City, State, Zip Code) n/a	
Name of Associated Broker or Dealer n/a	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individuals States)	States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	[ID]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS]	[MO]
	[PA]
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[PR]
Full Name (Last name first, if individual) n/a	
Business or Residence Address (Number and Street, City, State, Zip Code) n/a	
Name of Associated Broker or Dealer n/a	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individuals States)	States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	[ID]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS]	[MO]
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR]	[PA]
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PRO			
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price	Amo	ount Already Sold
		\$ -0-	\$	-0-
	Equity			,666,666.00
		\$4,999,998.00 \$		,000,000.00
			<u>\$</u>	
		\$ -0-	<u> </u>	-0-
	•	\$ -0-	<u> </u>	-0-
		\$ -0-	\$	-0-
	Total	\$4,999,998.00	\$1	,666,666.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Number Investors		lar Amount Purchase
	Accredited Investors	6		,666,666.00
	Non-accredited Investors	0		-0-
		<del></del>	- <u>\$</u> -	
	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.	n/a	\$	n/a
3.	Total (for filings under Rule 504 only)	n/a		
3.	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	n/a Type of	\$	n/a llar Amount
3.	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering	n/a Type of Security	S Do	n/a Har Amount Sold
3.	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering Rule 505	n/a  Type of Security n/a	Do \$	n/a llar Amount Sold n/a
3.	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering  Rule 505	Type of Security n/a n/a	Do	n/a ilar Amount Sold n/a n/a
3.	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering Rule 505	Type of Security n/a n/a n/a	Do \$	n/a Har Amount Sold n/a n/a n/a
3.	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering  Rule 505	Type of Security n/a n/a	Do   \$   \$   \$   \$   \$   \$   \$   \$   \$	n/a ilar Amount Sold n/a n/a
<ol> <li>4.</li> </ol>	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering Rule 505	Type of Security n/a n/a n/a n/a	Do   \$   \$   \$   \$   \$   \$   \$   \$   \$	n/a Har Amount Sold n/a n/a n/a
	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering  Rule 505  Regulation A  Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish ar	Type of Security n/a n/a n/a n/a	Do   \$   \$   \$   \$   \$   \$   \$   \$   \$	n/a Har Amount Sold n/a n/a n/a
	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering  Rule 505  Regulation A  Rule 504  Total  Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish ar estimate and check the box to the left of the estimate.	Type of Security n/a n/a n/a n/a	Do: \$ \$ \$ \$ \$ \$ \$ \$ \$	n/a tlar Amount Sold n/a n/a n/a n/a
	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering Rule 505  Regulation A  Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish ar estimate and check the box to the left of the estimate.  Transfer Agent's Fees	Type of Security n/a n/a n/a n/a	Do  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	n/a Har Amount Sold n/a n/a n/a n/a n/a
	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering  Rule 505  Regulation A  Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish ar estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs.	Type of Security n/a n/a n/a n/a	Do  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	n/a  illar Amount Sold n/a n/a n/a n/a -00-
	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering  Rule 505  Regulation A  Rule 504  Total  Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs  Legal Fees	Type of Security n/a n/a n/a n/a N/a	Do  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	n/a Har Amount Sold n/a n/a n/a n/a -00- 530,000.00
	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering Rule 505	Type of Security n/a n/a n/a n/a N/a	\$ Do	n/a Har Amount Sold n/a n/a n/a n/a -00- 30,000.00
	Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering Rule 505	Type of Security n/a n/a n/a n/a  n/a  n/a	Do  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	n/a  Rlar Amount Sold n/a n/a n/a n/a -00330,000.00 -00-

C. OFFERIN	NG PRICE, NUMBER OF INVESTORS, EX	PENSES AND USE OF PROCEED	S	
total expenses furnished in response t	gregate offering price given in response to Part C — Question 4.a. This different	ence is the "adjusted gross		\$4,969,998.00
of the purposes shown. If the amount	sted gross proceeds to the issuer used or p for any purpose is not known, furnish an of the payments listed must equal the adj Question 4.b above.	estimate and check the box		
		Officer	yments to s, Directors & Affiliates	Payments to Others
Salaries and fees		\$_	-0-	S0-
Purchase of real estate		S_	0	<b>\$0-</b>
Purchase, rental or leasing and installat	ion of machinery and equipment		-0-	S0-
Construction or leasing of plant buildin	gs and facilities		-0-	\$0-
	ling the value of securities involved in the of another issuer pursuant to a merger)		-0-	\$0
Repayment of indebtedness			-0-	\$ -0-
Working capital			-0-	\$4,969,998.0
Other (specify):				
		Пс	-0-	□ \$ <u>-0-</u>
			-0-	
Total Payments Listed (column totals a	dded)			59,998.00
	D. FEDERAL SIGNAT	ΓURE	· · · · · · · · · · · · · · · · · · ·	
The issuer has duly caused this notice to be signature constitutes an undertaking by the information furnished by the issuer to any to the information furnished by the issuer to any to the information furnished by the issuer to any to the information furnished by the issuer to any to the information furnished by the issuer to any to the information furnished by the issuer to any to the information furnished by the issuer to any to the information furnished by the issuer to any to the information furnished by the issuer to any to the information furnished by the issuer to any to the information furnished by the issuer to any to the information furnished by the issuer to any to the information furnished by the issuer to any to the information furnished by the in	ne issuer to furnish the U.S. Securities a	nd Exchange Commission, upon		
Issuer (Print or Type)	Signature		Date	
NanoStar, Inc.	Mich		May	17,2005
Name of Signer (Print or Type) Michael Clary	Title or Signer (Print or Type) President and Chief Executive Of	ificer		
	ATTENTIO	N		
Intentional misstateme	nts or omissions of fact constitute feder	al criminal violations. (See 18.	U.S.C. 1001.)	)

		E. STATE SIGNATURE						
1.	Is any party described in 17 CFR 230.262 pr	esently subject to any of the disqualification provisions of such rule?.	Yes	No				
		See Appendix, Column 5, for state response.						
2.	<ol> <li>The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.</li> </ol>							
3.	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.							
	e issuer has read this notification and knows the authorized person.	he contents to be true and has duly caused this notice to be signed or	ı its behalf by the und	dersigned				
	uer (Print or Type)	Signature	Date					
Nar	noStar, Inc.	m.cc	May 17, 2	005				
	me (Print or Type)	Title (Print or Type)						
IVIIC	Michael Clary President and Chief Executive Officer							

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

1		2	3			4			5
	Intendinon-accinvest	to sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	1 22					1			
AK	1							1	1
AZ									
AR		— — · · · ·							
CA		Х	Series B Preferred Stock \$4,999,998.00	1	\$672,042.50	-0-	-0-		х
со		х	Series B Preferred Stock \$4,999,998.00	2	\$322,581.00	-0-	-0-		х
СТ		х	Series B Preferred Stock \$4,999,998.00	3	\$672,042.50	-0-	-0-		Х
DE									
DC									
FL									
GA							_		
HI		_							
ID									
IL									
IN									
IA									
KS									<u></u>
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS									
МО									
MT									
NE									
NV									

# APPENDIX

1		2	3			4		:	
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)	
State	Yes	No	Convertible Securities	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NH	103	-110	Convertible Securities	Investors	rinount	THVESTORS .	- Amount	100	
NJ				<del> </del>					
NM									
NY									
NC		,							
ND									
ОН	-						<u> </u>		
OK								<u> </u>	
OR									
PA									
RI									
SC									
SD									
TN							<del>.</del>		
TX									
UT									
VT									
VA									
WA									
wv									
WI									
WY									
PR									